

Dan Bernal
President

Laurie Green, M.D.
Vice President

Edward A. Chow, M.D.
Commissioner

Susan Belinda Christian, J.D.
Commissioner

Cecilia Chung
Commissioner

Suzanne Giraudo ED.D
Commissioner

Tessie M. Guillermo
Commissioner

**HEALTH COMMISSION
CITY AND COUNTY OF SAN
FRANCISCO**

**London N. Breed Mayor
Department of Public Health**



Grant Colfax, MD
Director of Health

Mark Morewitz, M.S.W.
Executive Secretary

TEL (415) 554-2666
FAX (415) 554-2665
Web Site: <http://www.sfdph.org>

MINUTES

**JOINT CONFERENCE COMMITTEE FOR
ZUCKERBERG SAN FRANCISCO GENERAL
HOSPITAL AND TRAUMA CENTER
Tuesday, January 26, 2021 3:00 p.m.
REMOTE MEETING VIA WEBEX EVENT**

1) CALL TO ORDER

Present: Commissioner Edward A. Chow, M.D., Chair
Commissioner Susan Belinda Christian, J.D.
Commissioner Laurie Green, M.D.

Staff: Susan Ehrlich MD, Lisa Winston MD, Claire Horton, MD, Dan Schwager, Terry Dentoni,
Kim Nguyen, Karrie Johnson, Leslie Safier, Sue Carlise MD, Karen Hill, Basil Price, Jennifer Boffi,
Lukejohn Day MD, Andrea Turner, Adrian Smith, Michael Gerchow

The meeting was called to order at 3:03pm. Commissioner Green chaired the meeting until Commissioner Chow arrived at 3:42pm.

**2) APPROVAL OF THE MINUTES OF THE DECEMBER 22, 2020 ZUCKERBERG FRANCISCO GENERAL
JOINT CONFERENCE COMMITTEE MEETING**

Action Taken: The Committee unanimously approved the December 22, 2020 meeting minutes.

3) REGULATORY AFFAIRS REPORT

Adrian Smith, Director of Regulatory Affairs, presented the item.

Commissioner Comments:

Commissioner Green thanked Mr. Smith for his impactful work. She asked if there are financial consequences due to the pressure ulcer finding. Mr. Smith stated that there will likely be some financial penalties with the Volume Based Purchasing. He noted that ZSFG deemed these cases unavoidable so there is no possibility that Medicare and MediCal could deny payment for services.

Commissioner Christian asked for clarification and context on the determination that ZSFG was not found at fault in the pressure ulcer cases. Mr. Smith stated that the findings indicate that ZSFG correctly reported what happened and the hospital followed its protocols; staff did all they could to help the patients.

Commissioner Christian asked for more information regarding how ZSFG engages with a sexual assault victim when an incident occurs at the hospital. Mr. Smith stated that the alleged victim may file charges and ZSFG offers counseling. ZSFG lets the victim know that the hospital must report the incident to the state.

Commissioner Christian asked if ZSFG explains services that are available or actually offers services to the victim. Mr. Smith stated that staff explain to the victim that rape treatment counseling is available, but it is not always accepted. Commissioner Christian encouraged ZSFG to be more proactive by not just explaining that rape treatment counseling (RTC) is available but for the counselor to come to the victim in person to offer services. She also noted that often, those who are victimized have a difficult time admitting to themselves that the incident was sexual assault; a counselor with expertise in this area may be effective in providing needed support. Mr. Smith stated that he would take this suggestion back to the psychiatric team for consideration.

4) ZSFG COVID-19 VACCINE UPDATE

Lukejohn Day, M.D., Chief Medical Officer, presented the item.

Commissioner Comments:

Commissioner Chow commended Dr. Day and all staff involved for the tremendous work. He asked if other San Francisco Health Network (SFHN) clinics are providing vaccines too. Dr. Day stated that ZSFG is providing most of the vaccines because it currently houses the largest primary clinics in the Network. He noted that most of other SFHN health centers and the jail are offering vaccines.

Commissioner Chow asked if non-clinical staff have been offered vaccines. Dr. Day stated that every employee was offered vaccine before New Year's Day.

Commissioner Green asked is the entire SFHN population being offered vaccine due to the higher need of this population. Dr. Day stated that patients over 65 years of age are identified using EPIC and have been offered the vaccine. He noted that vaccine supply is low and inconsistent.

5) ZSFG CHIEF EXECUTIVE OFFICER'S REPORT & EMERGENCY DEPARTMENT NEWSLETTER

Susan Ehrlich, MD, Chief Executive Officer, presented the item.

SAFETY

1. COVID Vaccine Update

As of January 17th, over 14,600 vaccines have been administered to staff and 99% of clinical and non-clinical staff at ZSFG have received their first vaccine dose (the team is estimating an additional 1,000 vaccines by January 18th). Vaccinations will continue in CARR Auditorium and 4E (building 5, 4th floor) for staff. Currently, the team vaccinates 650-700 staff/day.

This past week, we vaccinated patients in 4A (our skilled nursing facility), the Behavioral Health Center (BHC) and long-term care patients in the inpatient psychiatry unit. ZSFG had over a 95% patient compliance rate with the vaccine in each of these areas.

The following week, the team will be increasing our patient vaccinations (with a goal of 1,200 patient vaccinations/day). The schedule will be as follows:

- Carr Auditorium – weekends and evenings and after January 25th it will be open to patients Mon-Sun 8am-8pm

- Learning Center (Building 30, 2nd floor) – starting January 20th Mon-Sun 8am-8pm
ZSFG plans to vaccinate patients who are in the CA Department of Public Health’s Tier 1a group and patients over 75 years.

Many thanks to Lukejohn Day, Chief Medical Officer, and all the teams who have come together to make all this possible in a short period of time. It is truly humbling to see all the tireless work, collegiality, and dedication of our staff during this time.

SAFETY 2. COVID Preparedness/Response

Responding to the Covid Surge

With the rise in San Francisco’s COVID-19 cases, ZSFG has taken many steps to help slow the transmission on campus for both our patients and staff.

Eye Protection Guidance

On December 29, 2020, ZSFG updated the Eye Protection Guidance to state that eye protection will continue to be worn for all patient encounters and now worn when within 6 feet of any other person when the interaction is anticipated to last at least 15 minutes. This change newly applied to office spaces, which resulted in the provision of eye protection to staff or the installation of plexiglass in office spaces.



Return to Work Policy

On December 31, 2020, the Occupational Health Services team updated ZSFG’s return to work policy. Return from international travel now requires a 10-day quarantine, with testing at five to nine days, when previously quarantine was only recommended. New guidance for return from domestic travel outside of the Bay area, was added: staff are still able to work if asymptomatic, with testing offered if there has been significant travel-related exposure.

Staff Screening

Following the changes made to Occupational Health Services’ return to work policy, our Screening Work Group also updated their staff screening questions. The team added two new exposure questions. Staff are now asked if they have traveled internationally or outside of the Bay Area within the last ten days every time they are screened.

Visitation Policy

On January 8, 2021, ZSFG published new changes to our Visitation Policy. In order to protect ZSFG’s most vulnerable patients in long term care, the 4A Skilled Nursing Facility no longer allowed visitation. However, new compassionate visitation exceptions for Emergency Department patients requiring cognitive and communication assistance have been added.

Many thanks to our staff and their dedication to one another and to our patients. Our staff is our greatest asset and we would not be the remarkable institution we are today without the amazing work they do each day.

DEVELOPING OUR PEOPLE

3. Open Workplace Violence Prevention Committee Meeting

On December 17, 2020, the Workplace Violence Prevention (WVP) Committee held their first ever, open committee meeting to all staff. In this open session, staff were able to hear about the work the committee has done over the past year and share any questions or comments directly with the committee.

Susan Brajkovic and Basil Price kicked off the event by presenting the risk management unusual occurrence (UO) report and the use of force report, respectively, for the month of November. Then Anh Thang Dao-Shah, WVP Committee co-chair, reviewed the accomplishments of the year. In 2020, despite the pandemic, the committee implemented a new Crisis Prevention Institute training program based on risk level and in-unit trainers, created a post-event checklist for managers, held a workshop on post-event debriefs, implemented an online UO form that meets Cal-OSHA workplace violence prevention standards, reported out monthly UO workplace violence data at the Executive Security, JCC and WVP meetings, and ensured the Cal-OSHA abatement plan was on target. She also shared the group's priorities for 2021 – to continue to listen to staff, complete the Cal-OSHA abatement plan, develop a workflow for post-event debriefs, better understand the effectiveness of current violence assessment and develop tools to assess and document risk.

Many thanks to the entire WVP committee for their incredible accomplishments this year. A special thank you to Anh Thang Dao-Shah for leading these important efforts and to Kim Nguyen who will be taking over as interim Co-Chair of the committee.

DEVELOPING OUR PEOPLE

4. Workplace Violence Prevention in the Emergency Department

The Emergency Department (ED) nursing staff have taken an active role in efforts to reduce and mitigate workplace violence at ZSFG. Members of the multidisciplinary ZSFG Workplace Violence Taskforce: Katie Aschero, RN, Julie Molitor, RN, Jen Ford, RN, Aubrie Stone, RN, Wendy Mitchell, MEA, and Kim King-Stitt, MEA, have been leading performance improvement work for "Code 50" in their department. Code 50 is an internal ED page, intended to alert staff of the need for additional support to respond to threats and assaults within the department. When this code is paged, ED nurses, MEAs, medical providers, and SFSD respond to deescalate the situation and collaboratively create a safe treatment plan for the patient. These nurses and their colleagues are committed to patient, staff, and community safety, and exemplify the True North Goals of Safety and Care Experience.

In addition, seven ED nursing staff have been certified as Crisis Prevention Institute (CPI) Nonviolent Crisis Intervention program trainers for ZSFG. CPI Nonviolent Crisis Intervention is a program that utilizes decision-making skills and de-escalation techniques for responding to and managing difficult situations, disruptive behavior, and escalating events in the workplace. This evidence-based training was adopted by SFDPH in 2017. As certified trainers for ZSFG, they will provide CPI training in the ED and eventually support a broader campus-wide cohort of CPI instructors. ZSFG Nursing would like to acknowledge the dedication of Aubrie Stone, RN, Jenn Leonard, RN, Juan Castaneda, RN, Katie Aschero, RN, Selam Gebreslassie, RN, Stevie Cohen, RN, and Wendy Mitchell, MEA.

DEVELOPING OUR PEOPLE 5. Countdown to 2021 Staff Appreciation Events

As ZSFG closed 2020, the Care Experience team coordinated ten enjoyable activities, opportunities for self-reflection and small tokens of gratitude for all staff. To kick off the countdown celebration, Chef Mike hosted the virtual ugly sweater contest, where staff and departments were encouraged to submit pictures and videos of their ugliest sweaters. Over 400 staff voted on the top three winners of the contest, who won gift cards and ZSFG apparel. Other celebrations throughout the ten days included all-staff giveaways of hot chocolate and cloth masks, a special holiday menu in the cafeteria, a poetry walk, scavenger hunt, chalk the walk event, and donation day. Many thanks to Care Experience for coordinating these wonderful events to express their gratitude to our staff for their unwavering commitment to our organization.



DEVELOPING OUR PEOPLE 6. ZSFG's New Chief Operating Officer

ZSFG is thrilled to announce the newest member of the Executive Team, our new Chief Operating Officer, Andrea Turner! Turner needs little introduction, having just served as our Acting Chief Operating Officer for the past few months and the Director of Imaging, Pathology and Interventional Services for the past three years. She also served as the Operations Chief in the COVID Command Center for several months this past year, leading eight branches and almost 400 individuals there.

Turner has had incredible experience and education leading up to her time at ZSFG. She served as Director of Imaging at hospitals in St. Louis, Missouri and in Davis, CA; she is a licensed Nuclear Medicine Technologist; she has earned a law degree, a Master of Business Administration, and has a Bachelor of Science in both Health Administration and Nuclear Medicine. Turner also served in the Air Force for eight years, part of it during Operation Desert Storm, achieving the rank of Captain and receiving several Commendation Medals.

Turner has proven herself here at ZSFG as an inspiring and visionary leader. She is passionate about equity; she has devoted herself to eliminating structural racism and health disparities through her work on the Equity Council and in operations. She is focused on data-driven improvement, having led initiatives in reducing no-show rates, registry use and radiology overreads, among other efforts. She is flexible and resilient, having recently taken on a co-leadership role for the Behavioral Health Center while Acting COO.

Turner has a wonderful spirit – she is driven and has a great sense of humor. She is enthusiastic and energized about serving all staff and our patients in this new role. Congratulations to Andrea Turner for this deserving, new role!

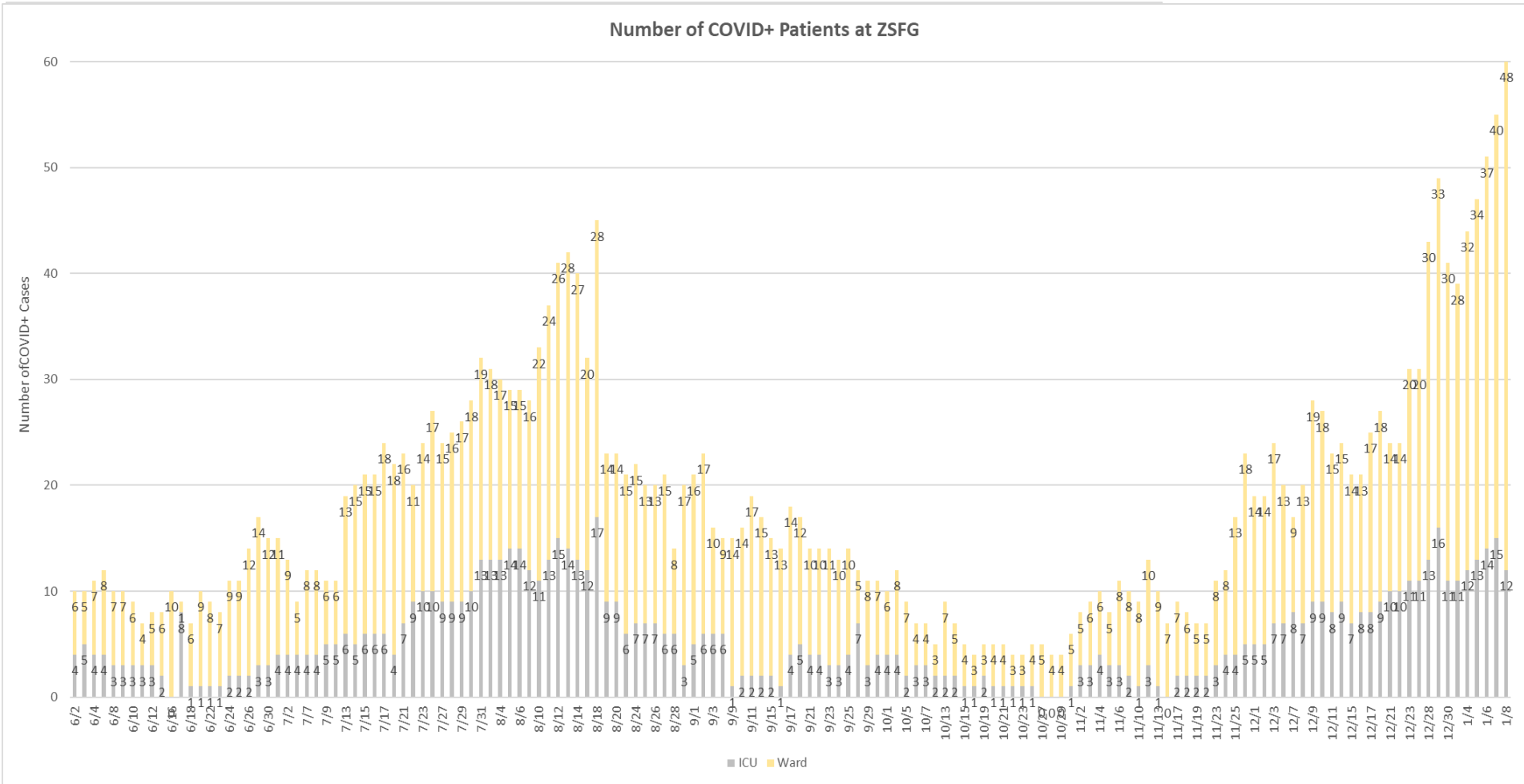
QUALITY

7. Partnership with the SF Conservation Corp

This past year, our Environmental Services (EVS) Department has partnered with the San Francisco Conservation Corp to develop our recycling program at ZSFG. At the beginning of the pandemic, the department was overwhelmed with recycling and in search of a new organization to help. The SF Conservation Corp has been an incredible partner in helping ZSFG become a more sustainable campus. Most recently, they have helped to guide the Operating Room staff in increasing their waste diversion and significantly decreasing their contamination by 60%. They have also helped to encourage staff to increase our waste diversion across campus and ensure that the recycling and environmental services workers remain safe, by placing waste materials in their appropriate locations.

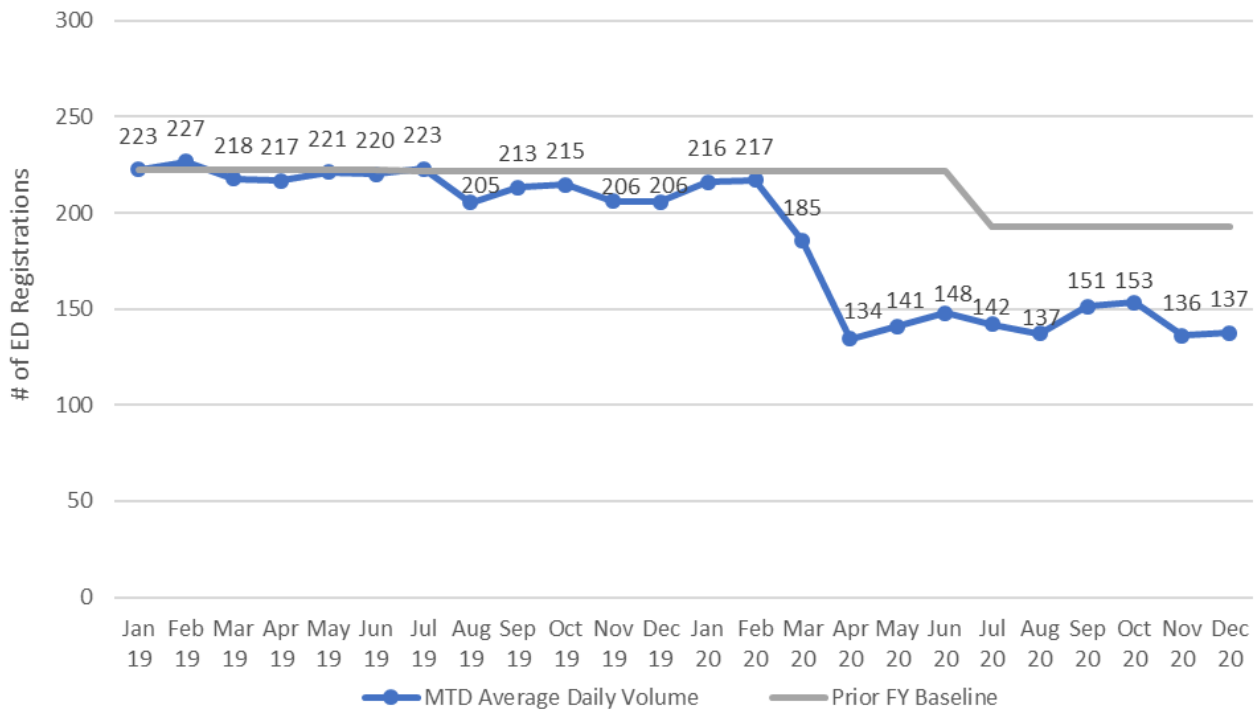
Many thanks to the EVS team and the SF Conservation Corp for making our campus safer and more sustainable!

QUALITY ZSFG COVID+ Cases

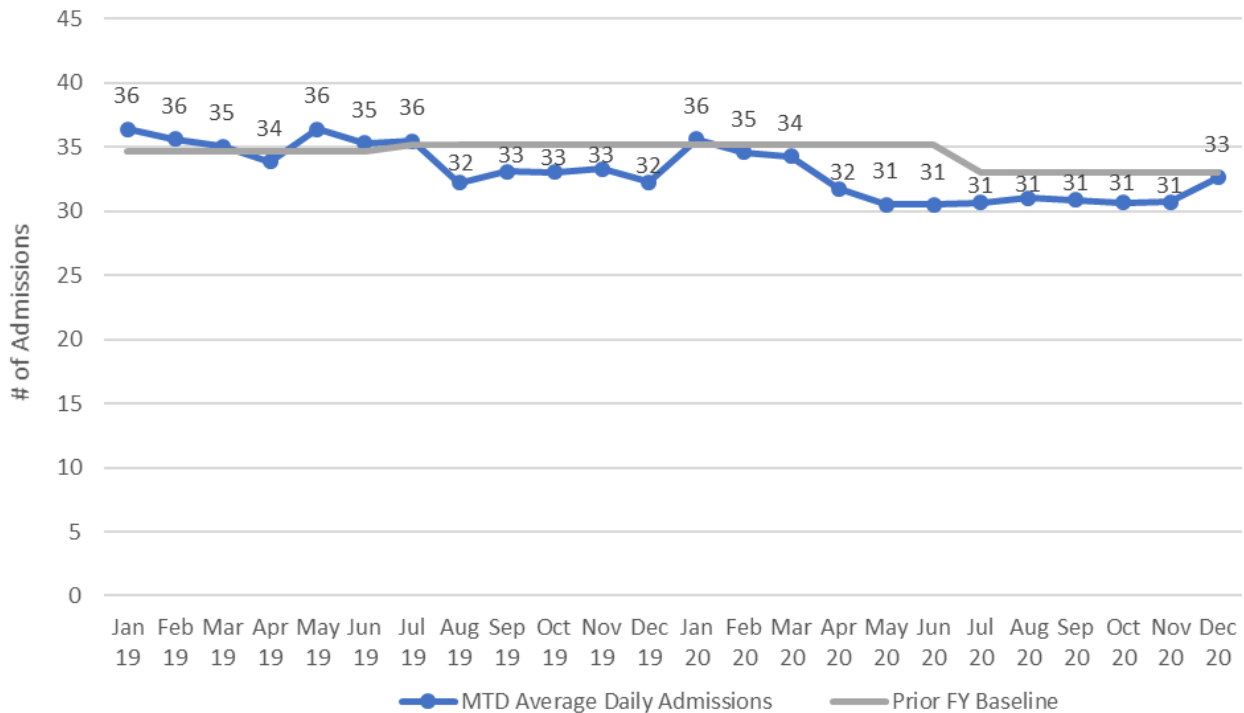


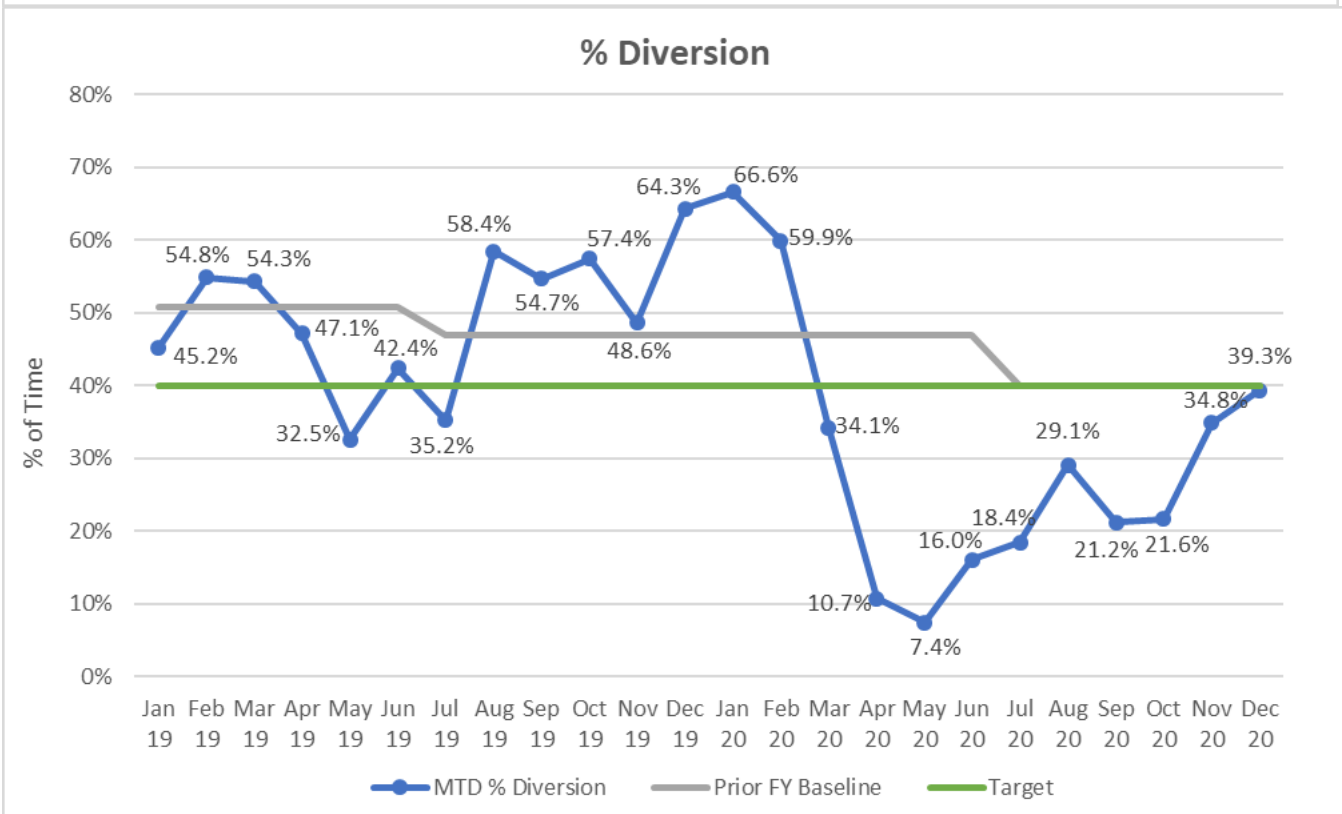
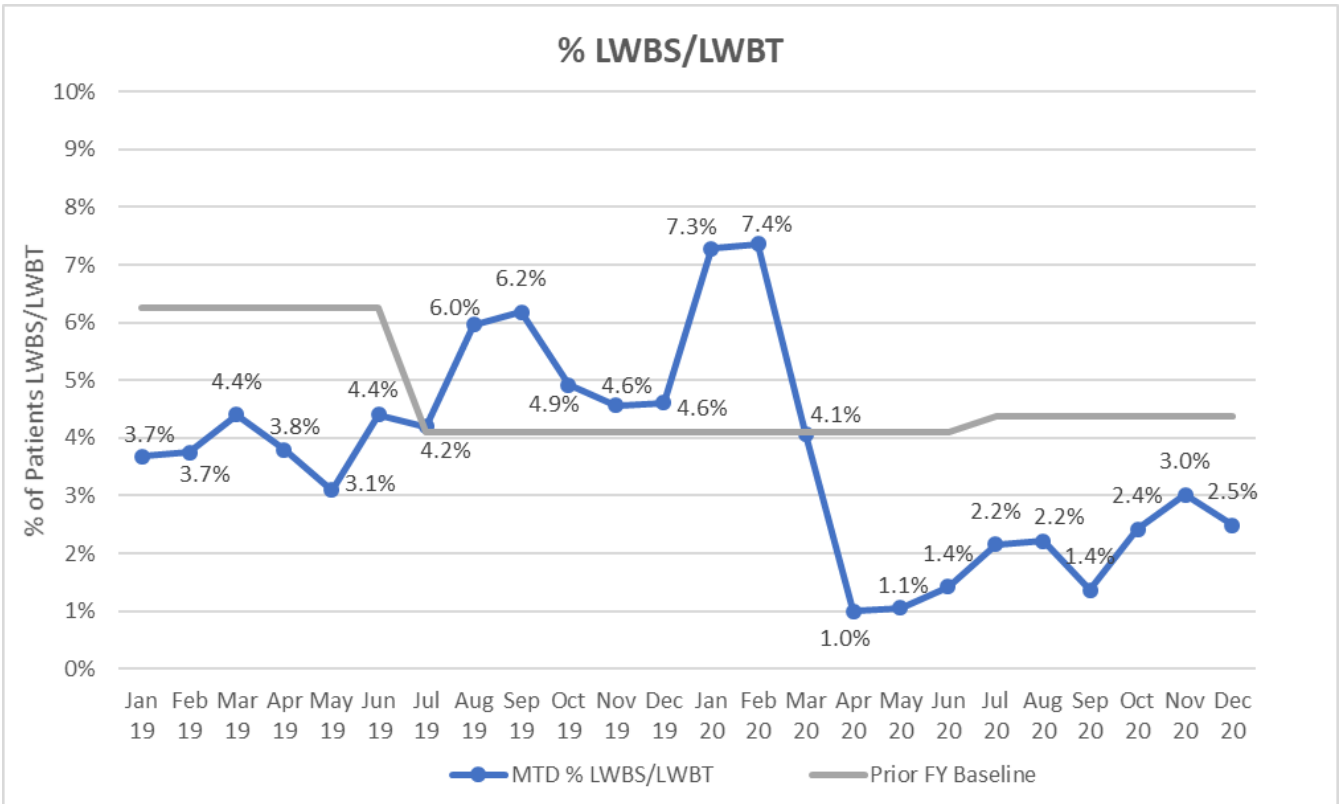
QUALITY Emergency Department Activities

Average Daily Volume

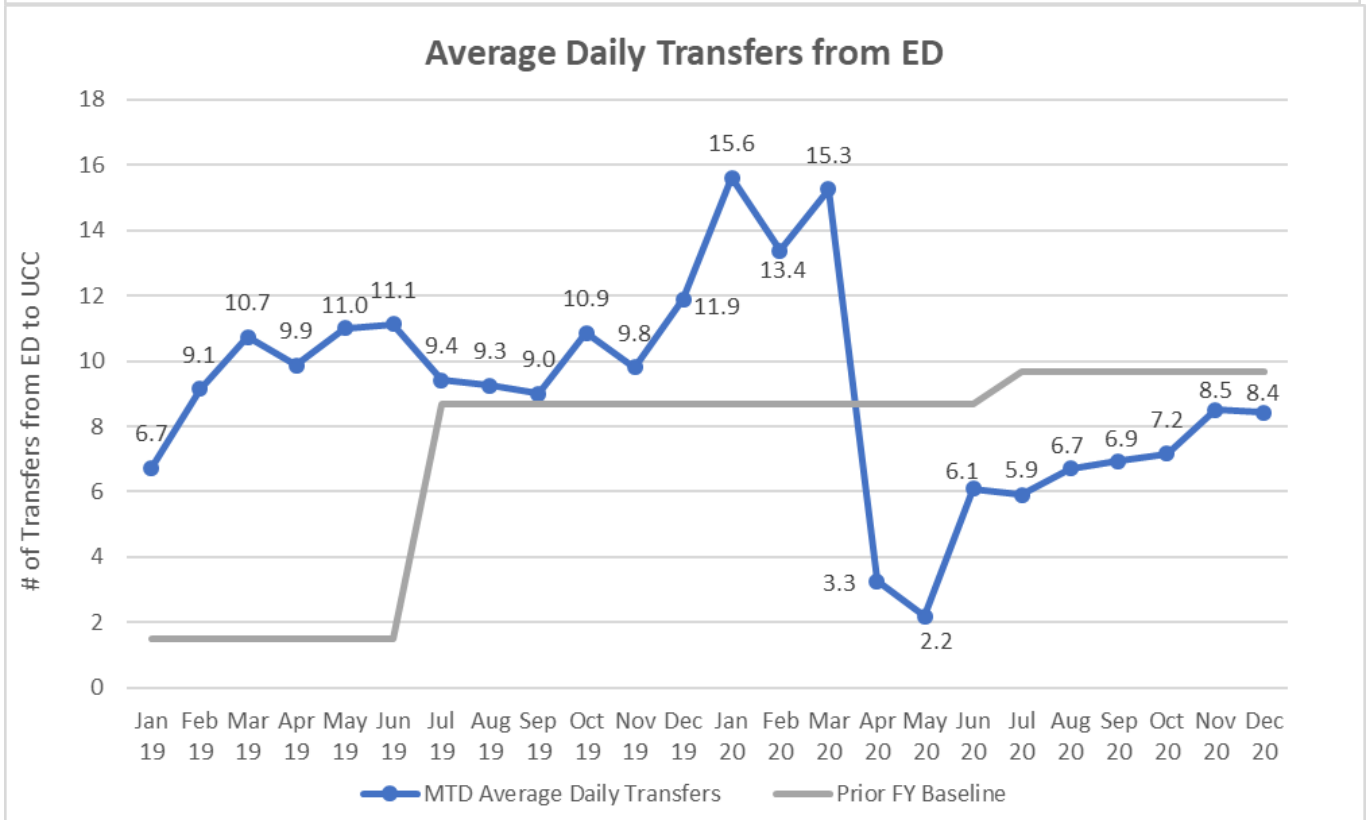
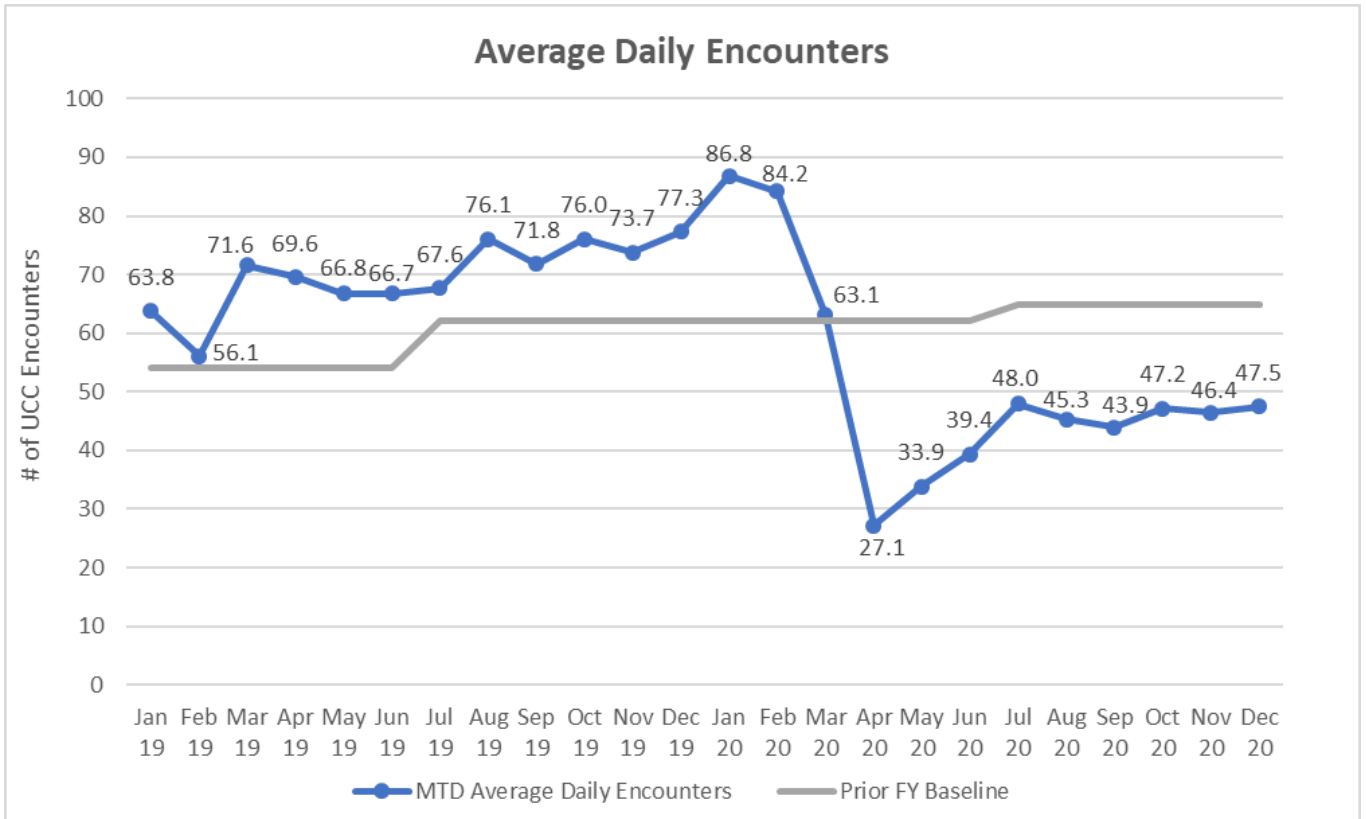


Average Daily Admissions

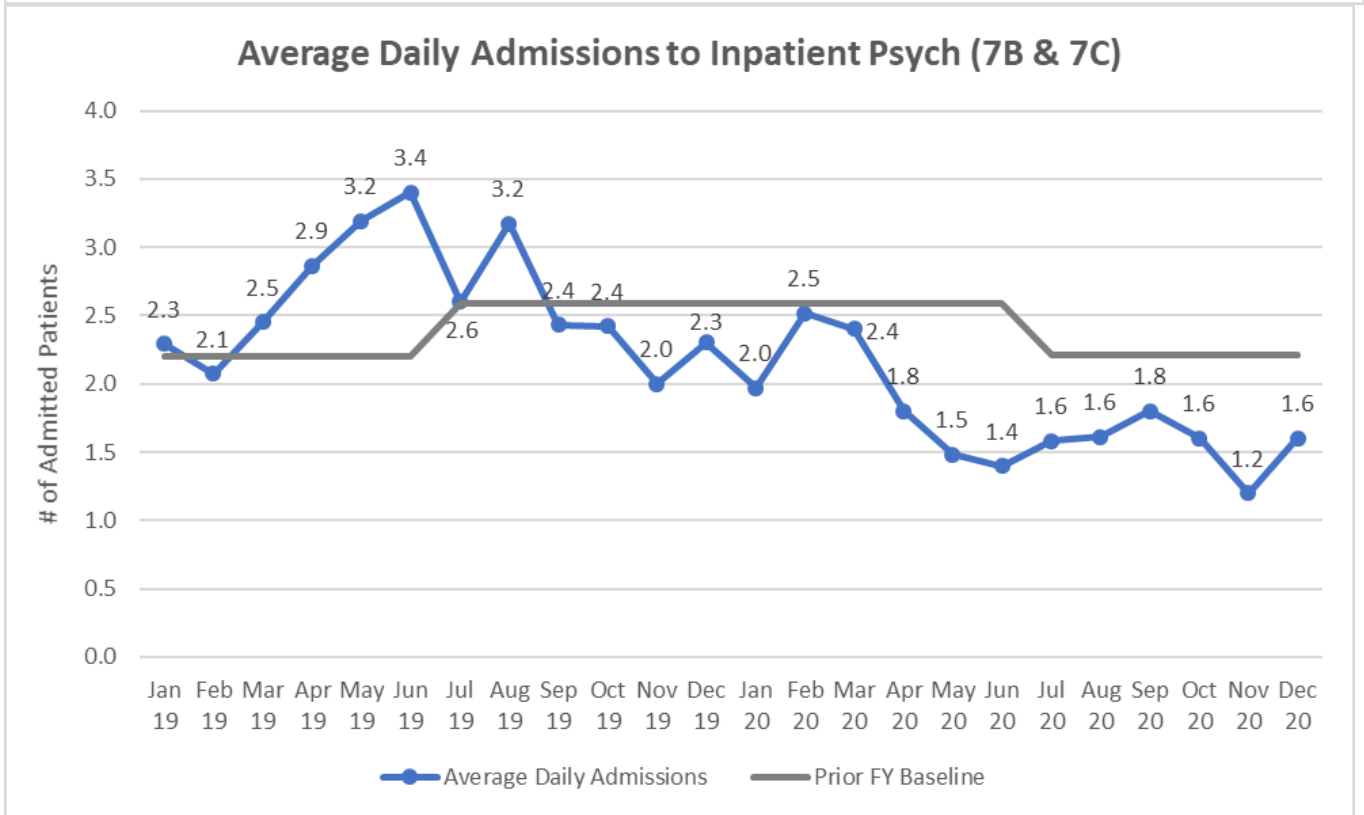
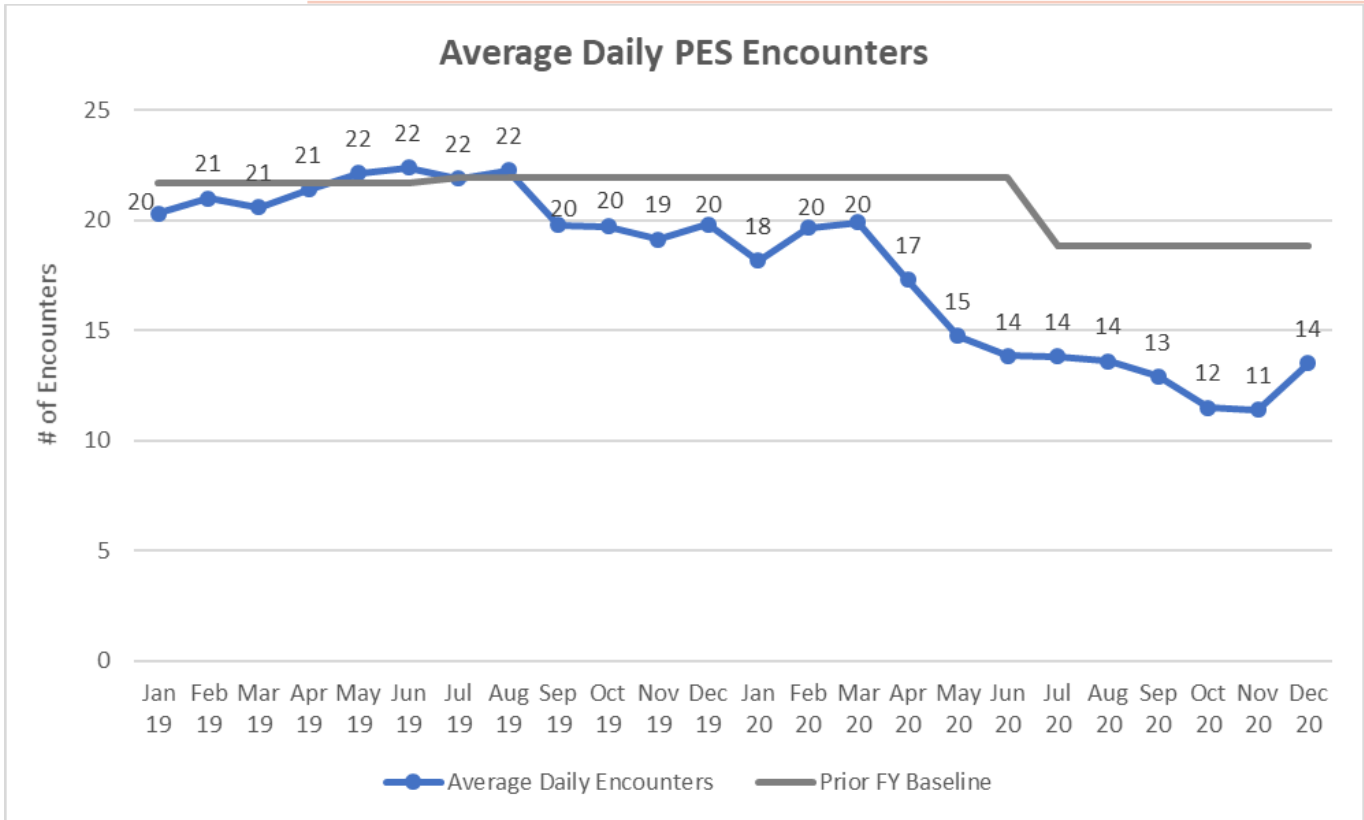




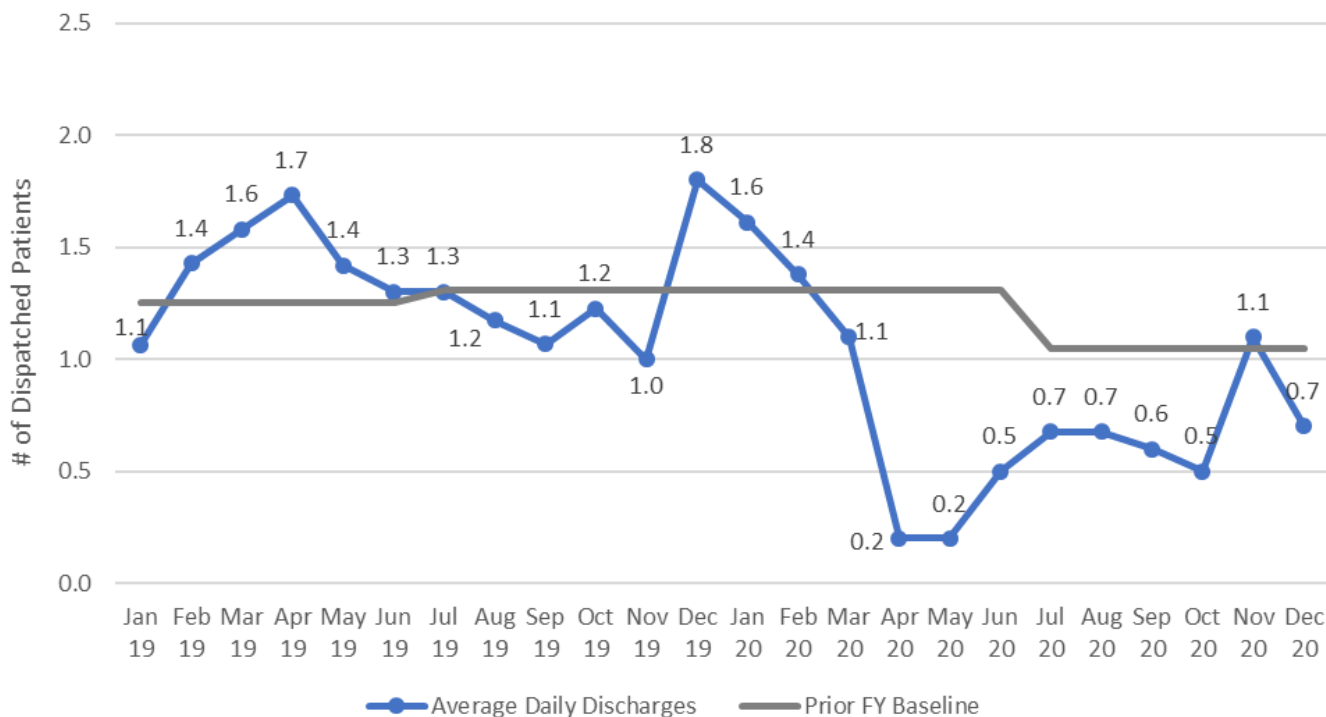
QUALITY Urgent Care Clinic Activities



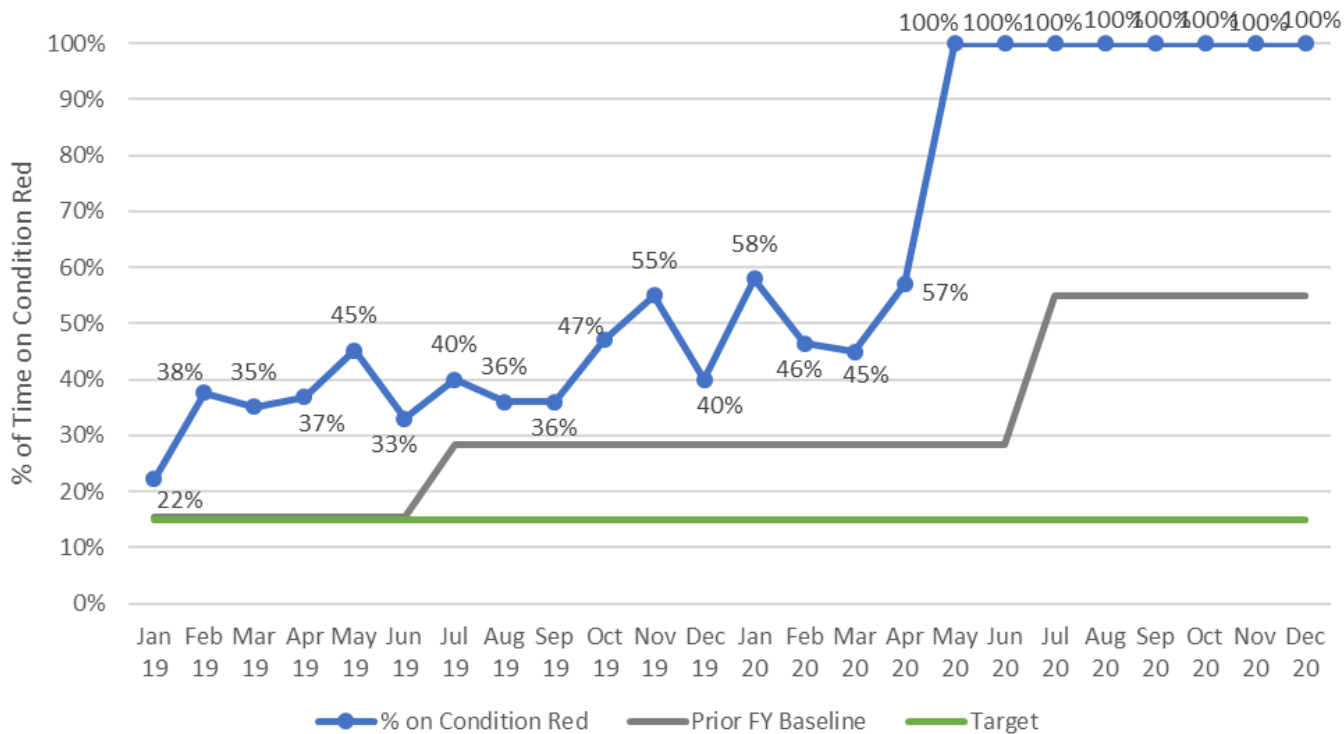
QUALITY Psychiatric Emergency Services Activities



Average Daily Discharges to Dore Urgent Care Clinic (DUCC)



PES Condition Red*



***We are using condition red as an external communication tool to signal that patients can not directly come to PES. They must be cleared by ED first.**

QUALITY Average Daily Census

MEDICAL/SURGICAL

Average Daily Census of Medical/Surgical was 174.61 which is 111.93% of budgeted staffed beds and 97.55% of physical capacity. 16.61% of the Medical/Surgical days were lower level of care days: 6.28% administrative and 16.61% decertified/non-reimbursed days.

INTENSIVE CARE UNIT (ICU)

Average Daily Census of ICU was 37.00 which is 132.14% of budgeted staffed beds and 63.79% of physical capacity of the hospital.

MATERNAL CHILD HEALTH (MCH)

Average Daily Census of MCH was 18.61 which is 62.04% of budgeted staffed beds and 44.32% of physical capacity of the hospital.

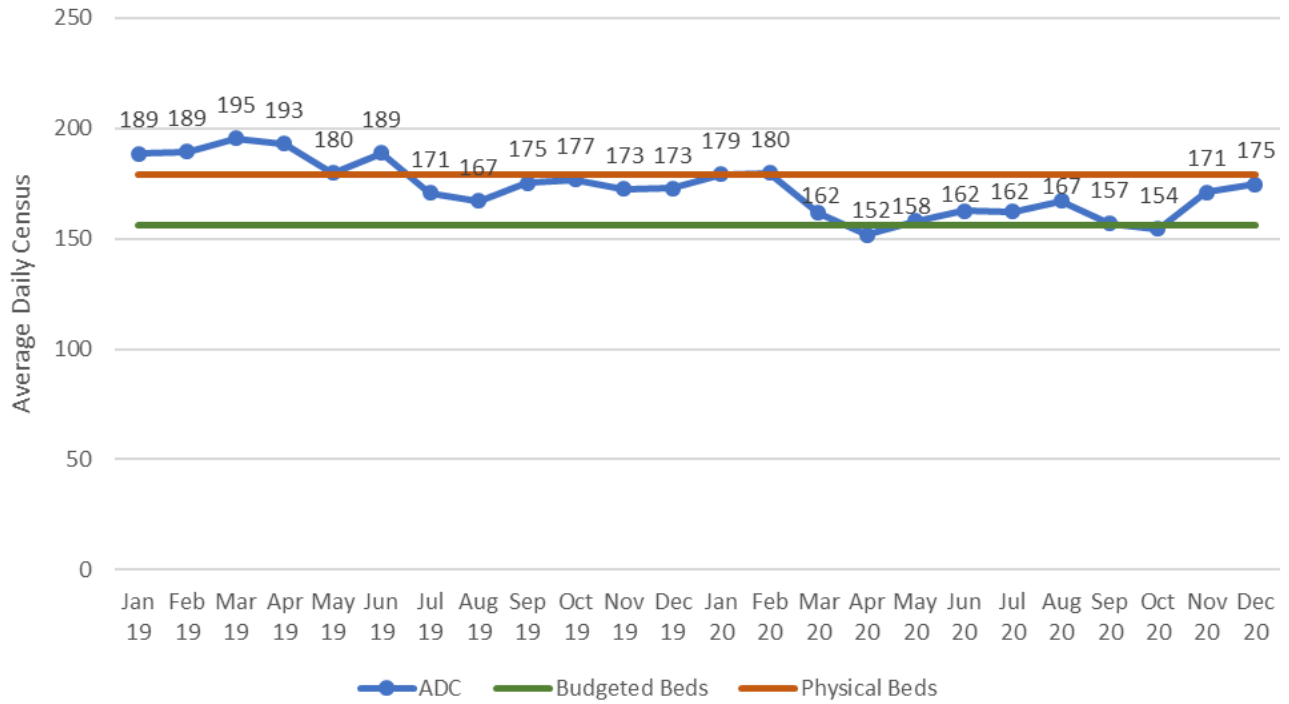
ACUTE PSYCHIATRY

Average Daily Census for Psychiatry beds, excluding 7L, was 39.26, which is 89.22% of budgeted staffed beds and 58.59% of physical capacity (7B & 7C). Average Daily Census for 7L was 5.77, which is 82.49% of budgeted staffed beds (n=7) and 48.12% of physical capacity (n=12). Utilization Review data shows 82.17% non-acute days (36.57% administrative and 45.60% non-reimbursed).

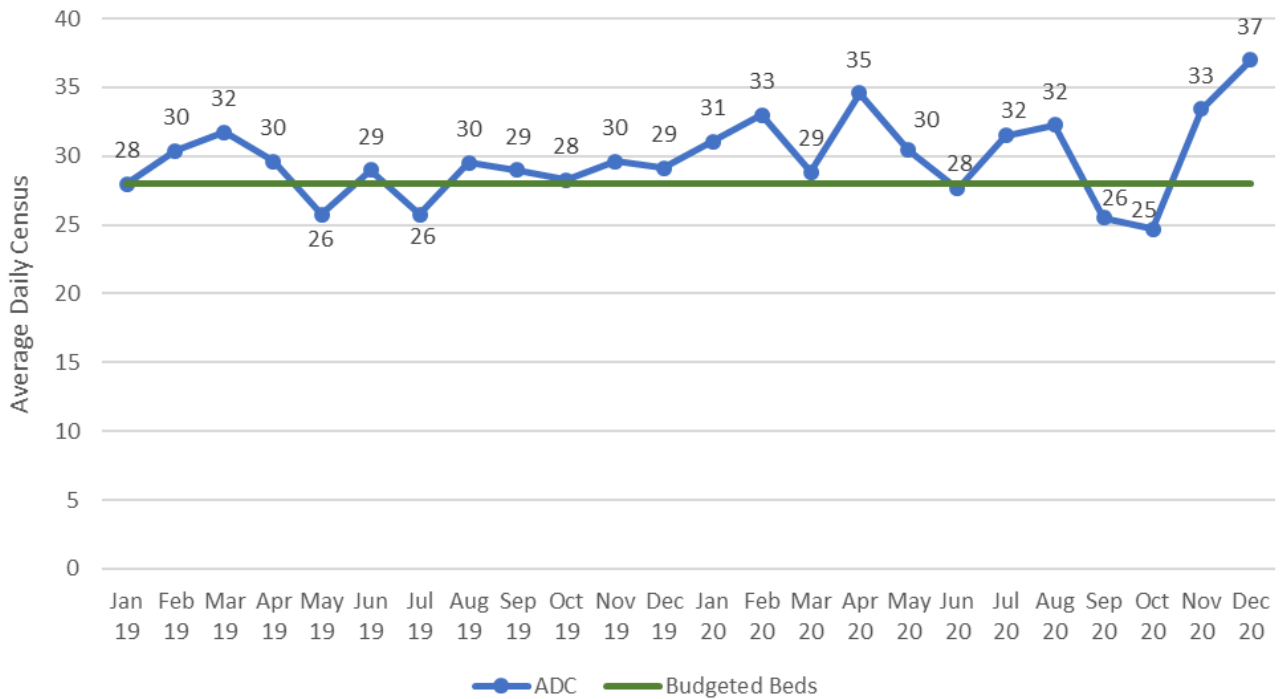
4A SKILLED NURSING UNIT

Average Daily Census for our skilled nursing unit was 29.81, which is 106.45% of our budgeted staffed beds and 99.35% of physical capacity.

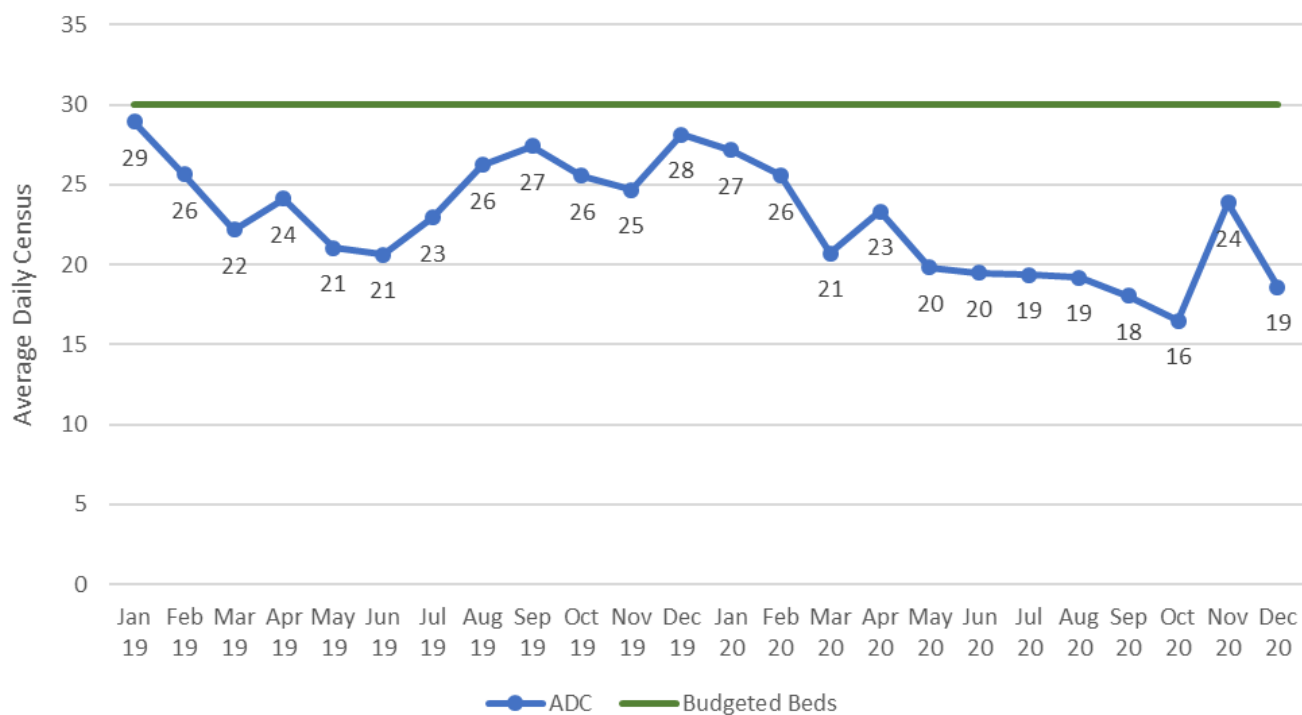
Medical Surgical (Incl. ED/PACU Overflow) Average Daily Census



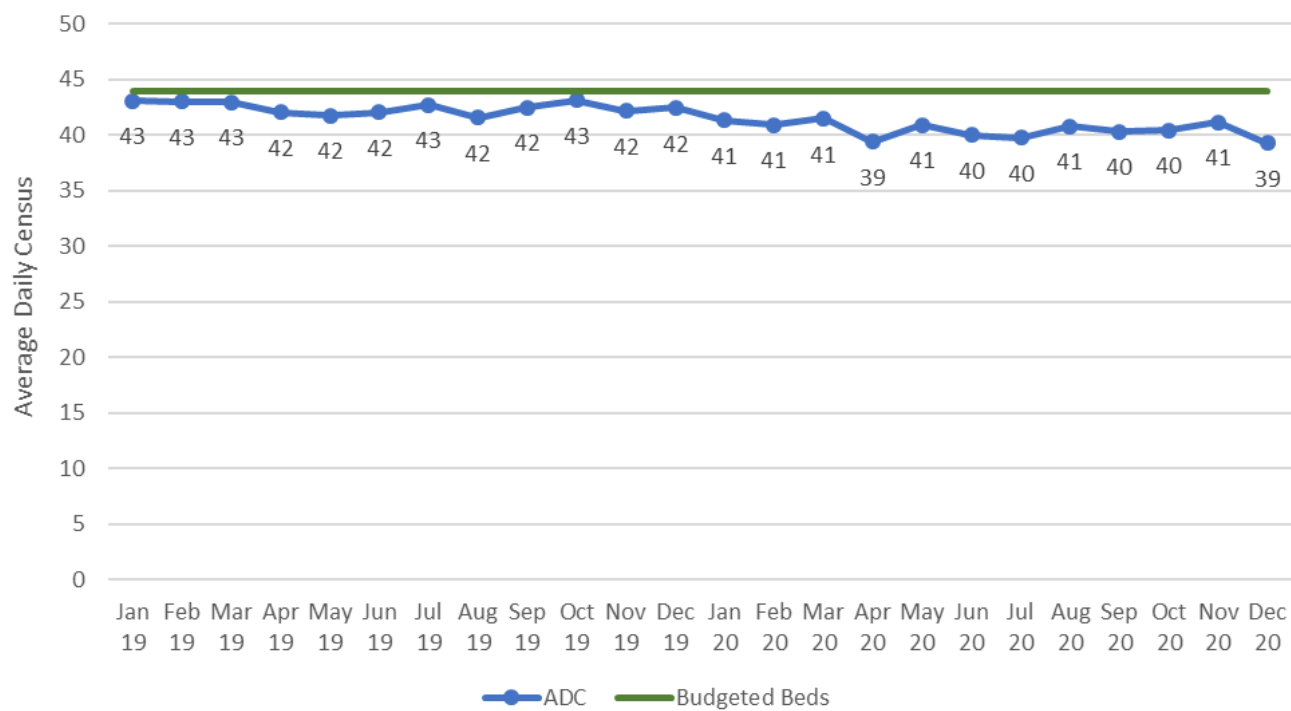
Intensive Care Unit Average Daily Census

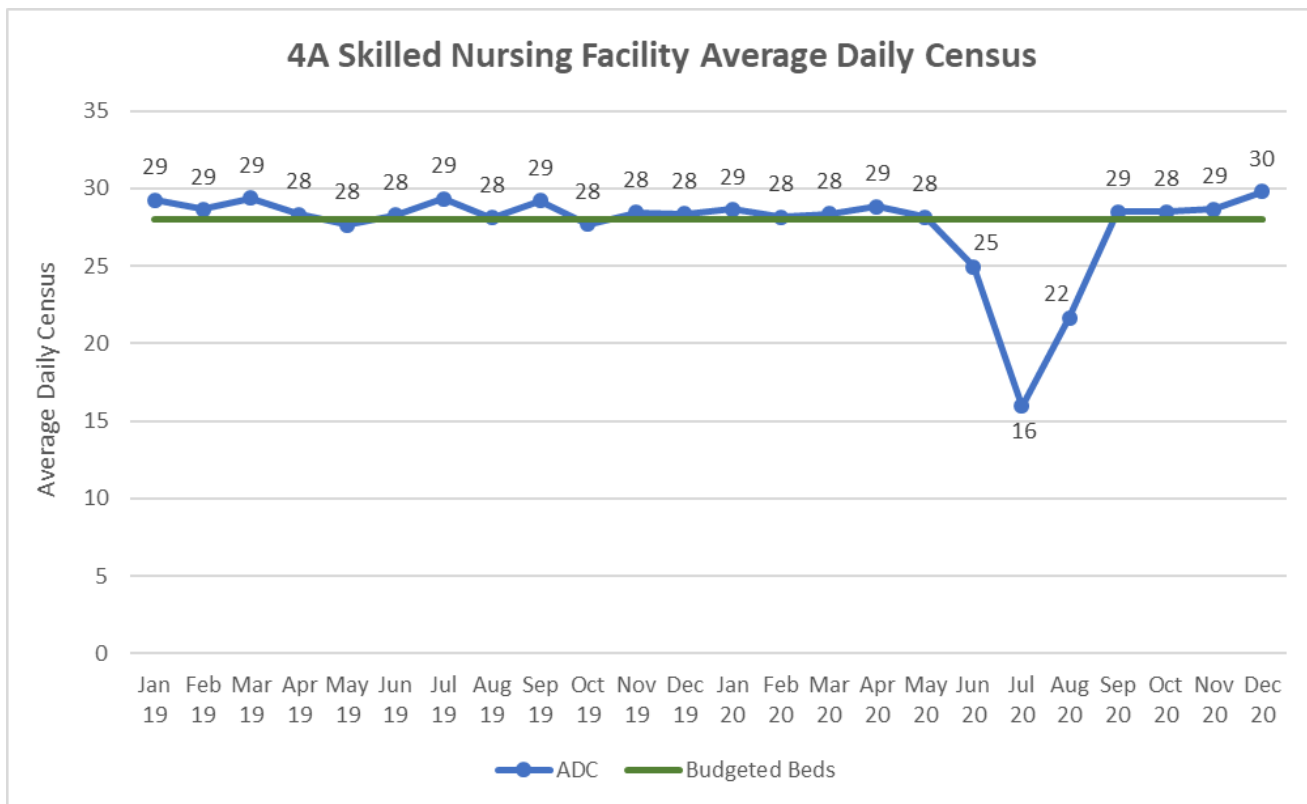


Maternal Child Health Average Daily Census

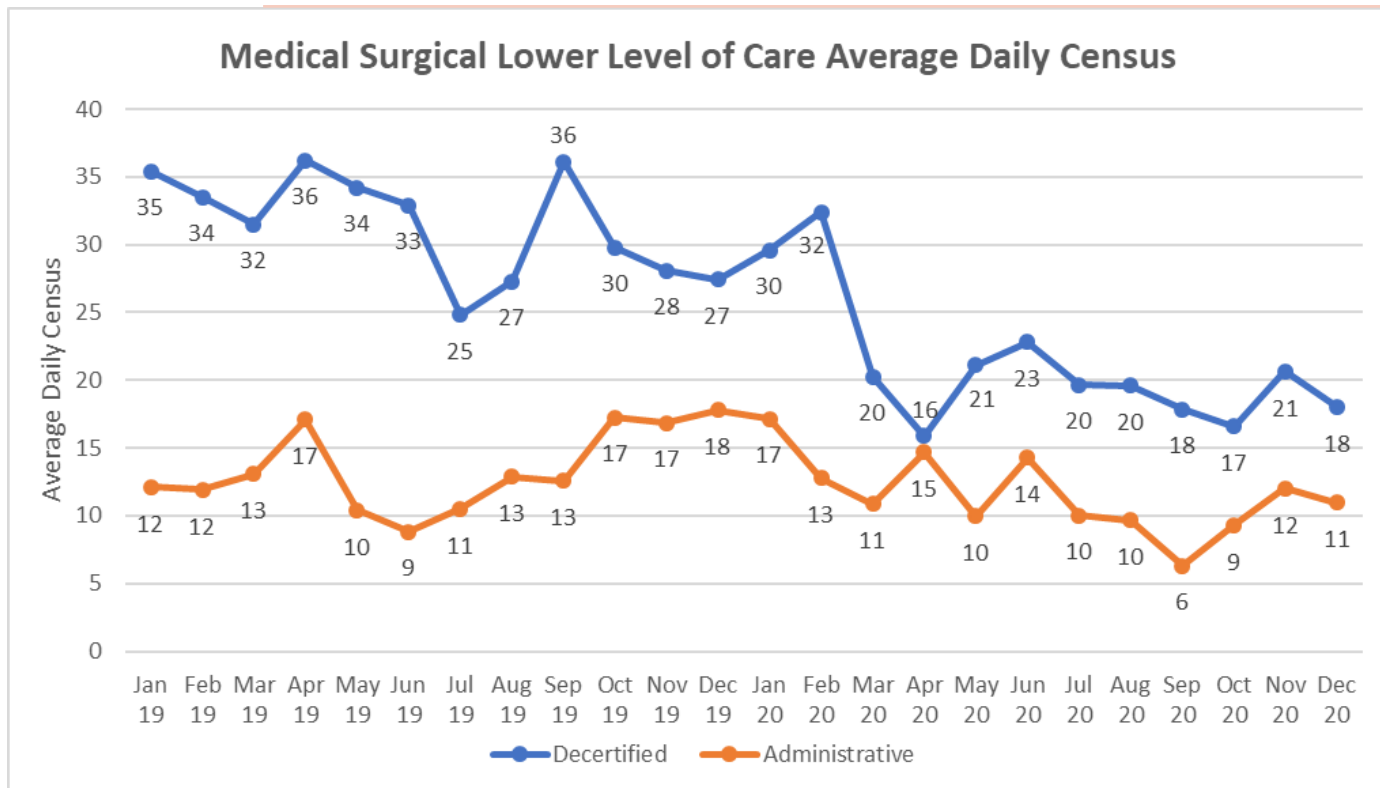


Acute Psychiatry (7B & 7C) Average Daily Census

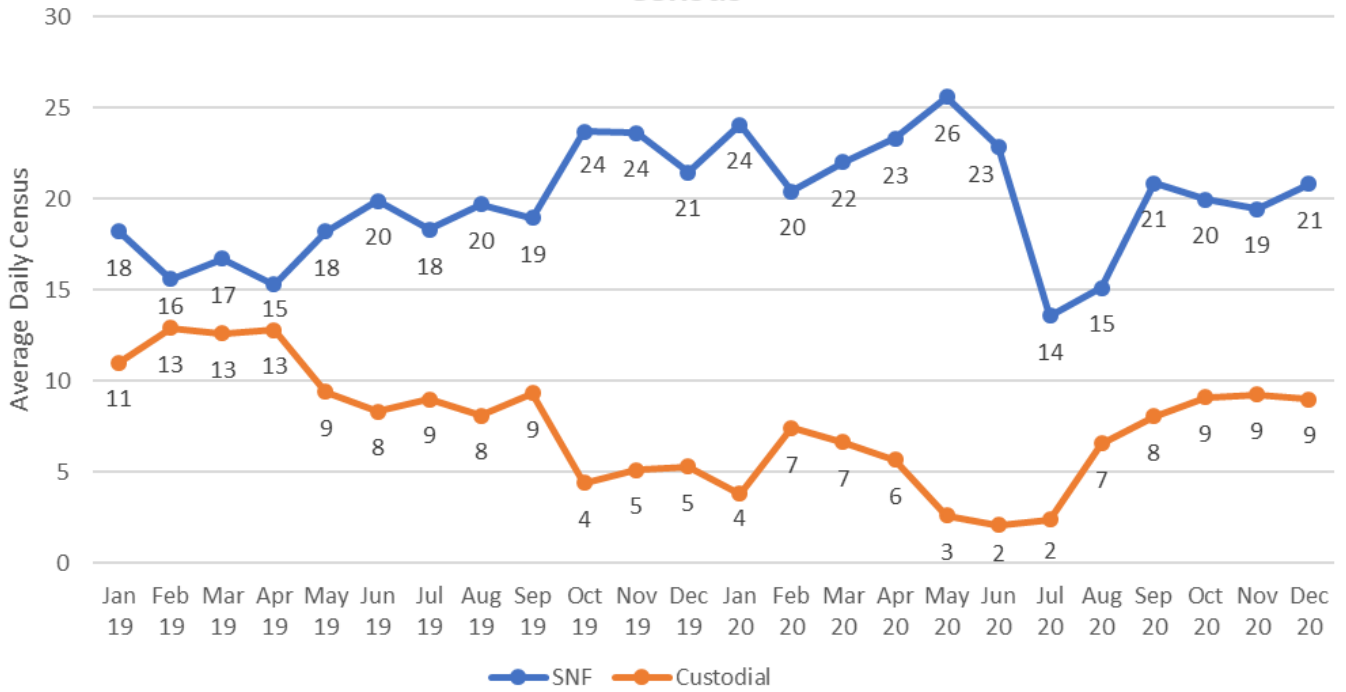




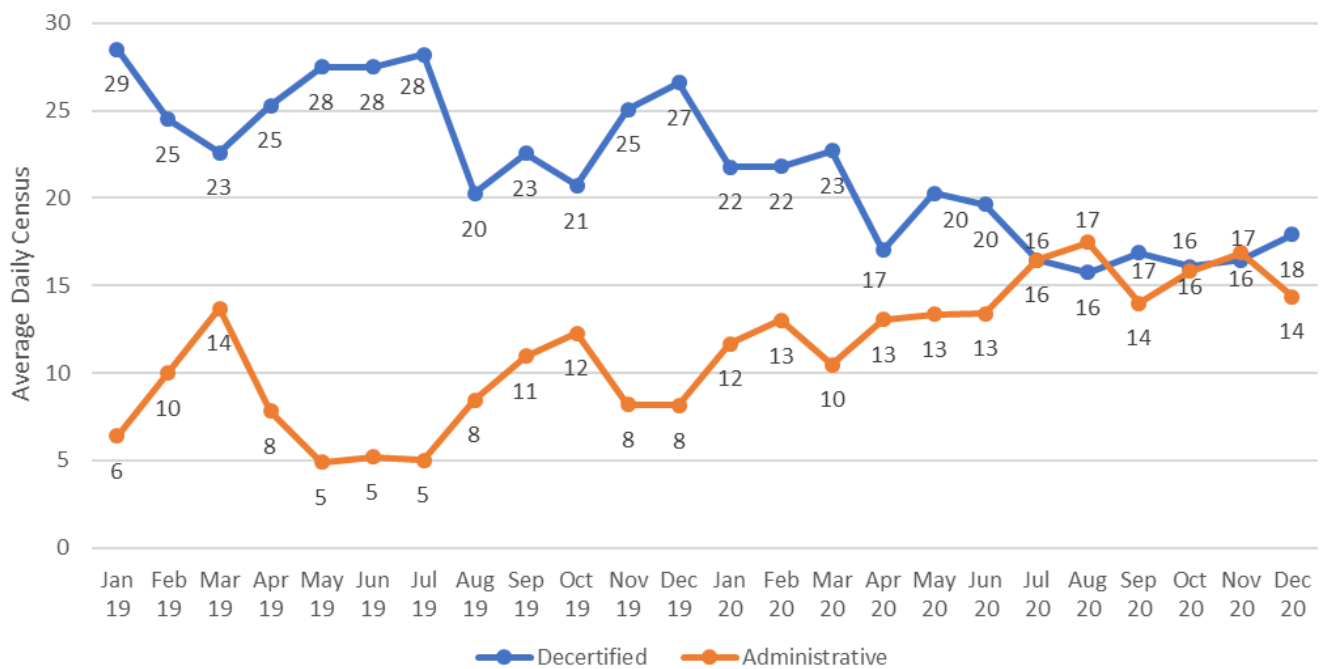
QUALITY Lower Level of Care Average Daily Census



4A Skilled Nursing Facility Lower Level of Care Average Daily Census

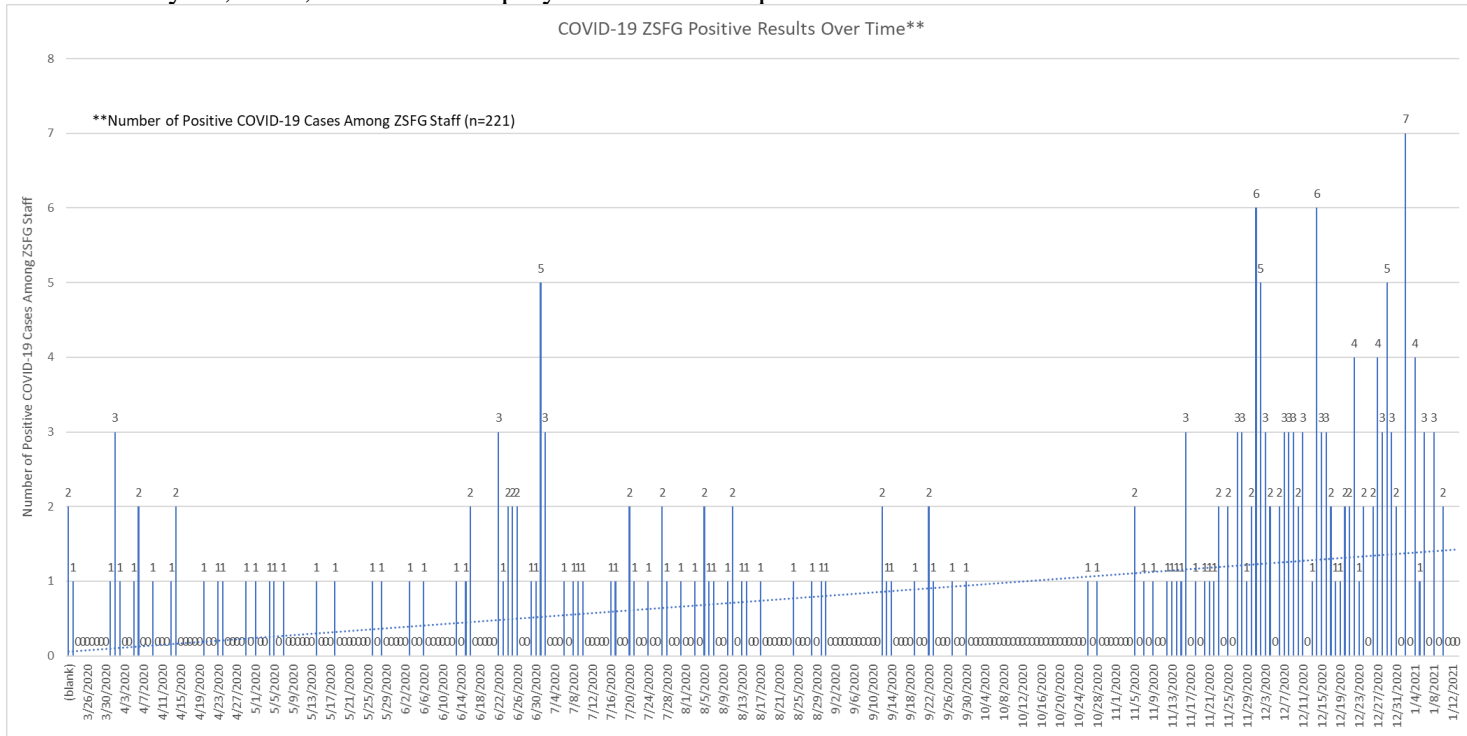


Acute Psych (7B & 7C) Lower Level of Care Average Daily Census

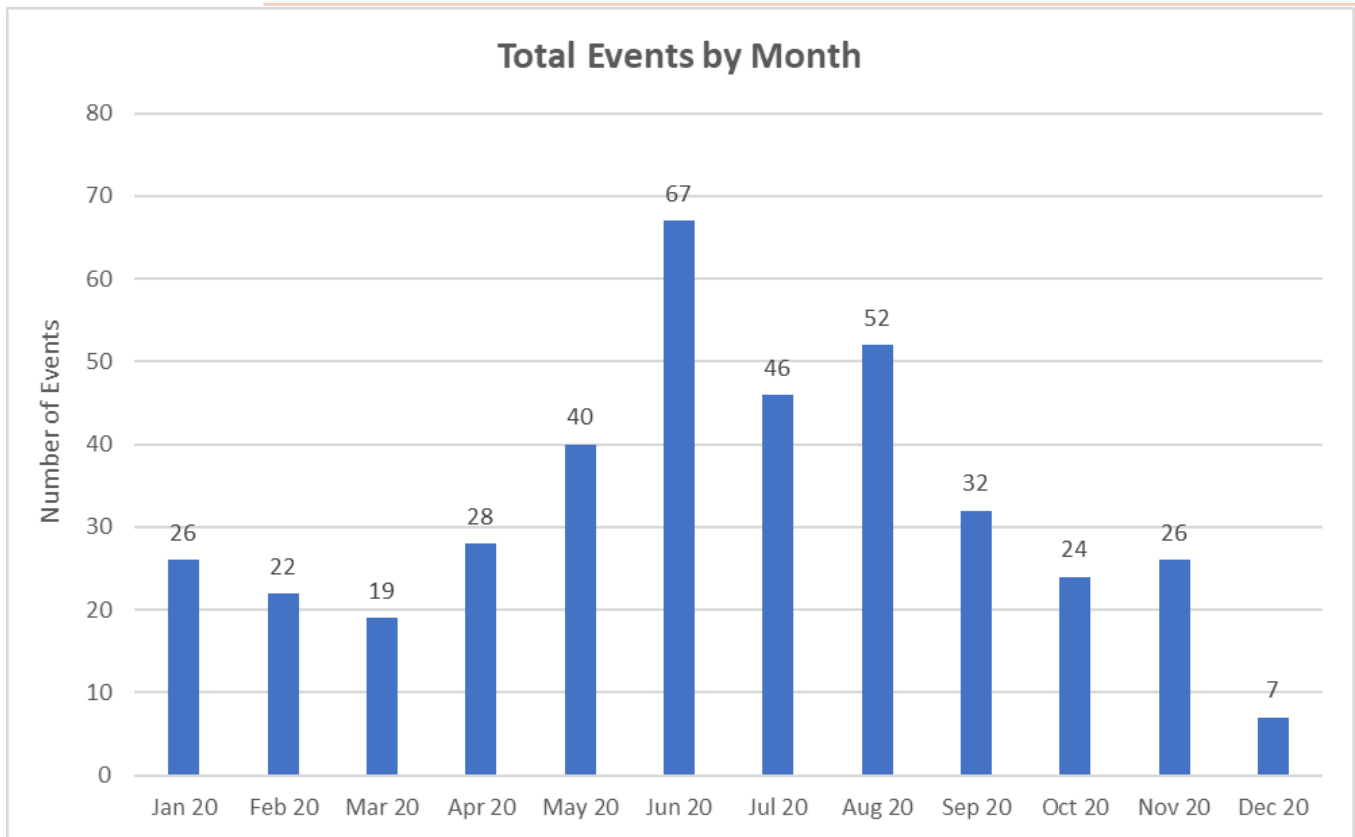


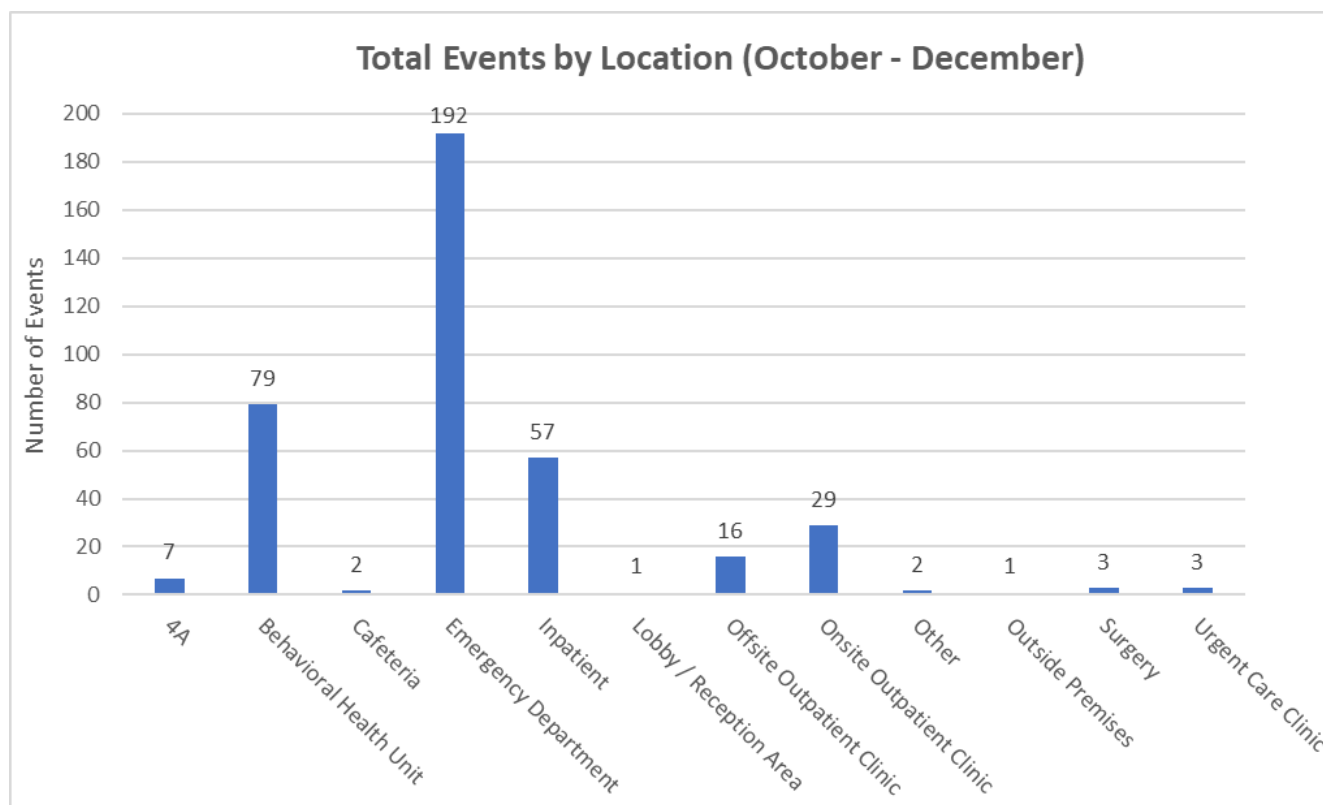
SAFETY Occupational Health COVID Testing

As of January 14, 2021, 221 ZSFG employees have tested positive for COVID-19.



SAFETY Workplace Violence Activity





Commissioner Comments:

Commissioner Chow stated that he appreciated the explanation of the diversion rates in Dr. Ehrlich's verbal presentation.

Commissioner Green complimented Dr. Ehrlich and others responsible for ensuring adequate staffing of the ICU during the pandemic. She noted that currently there is uncertainty regarding whether those vaccinated could possibly continue to shed virus. Dr. Winston stated that there is no peer-reviewed data yet. However, it is expected that those who are vaccinated will be protected against COVID-19 and that any continued shedding would be at levels so low that it would not pose a health concern to unvaccinated individuals.

Commissioner Green asked what the protocol is when someone who is vaccinated comes in contact with someone who is known to be COVID-19 positive. Dr. Winston stated that at this time, COVID-19 testing will continue to be encouraged.

Commissioner Christian expressed admiration for the astounding level of competency and professionalism in the context of the tremendous pressure of the pandemic.

6) ZSFG HIRING AND VACANCY REPORT

Karrie Johnson, Departmental Personnel Officer, DPH, presented the item.

Commissioner Comments:

Commissioner Chow thanked Ms. Johnson for the report.

Commissioner Christian asked if the difficulty in finding applicants for ICU nursing positions is related to the pandemic. Ms. Johnson stated that historically these areas are difficult to hire due to required qualifications; the pandemic has made it more difficult to find qualified candidates interested in these positions. She added that ZSFG has hired a new recruiter to assist in ZSFG's recruitment efforts.

Commissioner Green asked if there is a way to anticipate whether part-time nursing staff would take available full time positions. Ms. Johnson stated that nurse training programs have been cancelled at ZSFG during the pandemic; discussions regarding reopening the programs are underway. She noted that few part-time nurses accept offered for full time employment because they are employed elsewhere. Ms. Dentoni stated that prior to COVID-19, ZSFG was working with UCSF to add more nursing students to be in line for critical care training.

7) MEDICAL STAFF REPORT

Lisa Winston, M.D., Chief of Medical Staff, presented the item.

Radiology Clinical Service Report – Mark Wilson, MD, Chief (Presented at the Dec 17, 2020 Business MEC)

Highlights of the report are the following:

- Scope of Service – includes Comprehensive Diagnostic Imaging/Interventional Radiology Services, 24/7 coverage for emergent exams and procedures, Hospital based department, Inpatient IR admitting service, Outpatient IR/spine procedure clinics, Support Stroke, Trauma, Oncology, Women’s Health, OR, Inpatient and Outpatient services.
- Services Provided – Abdominal Imaging, Thoracic Imaging, Neuroimaging, General/OB Ultrasound, Breast Imaging/Tomosynthesis, Musculoskeletal Emergency Imaging, Interventional Radiology, Neurointerventional Radiology/Stroke Treatment
- Imaging Modalities – List of different imaging modalities in Bldg., 5, Avon Center and Bldg. 25. Mammography Van for greater access is based in the Avon Center, Most imaging services are done in Bldg. 25.
- Leadership Structure – Strong collaboration between UCSF and DPH/ZSFG Radiology Departments. Dr. Christopher Hess is the current Chair of UCSF Radiology & Biomedical Imaging with Dr. Mark Wilson as the Vice-Chair of UCSF Radiology at ZSFG
- Faculty – There are 17 active faculty (based at ZSFG) with half able to read multiple types of imaging, and 14 courtesy faculty
- Training Programs – ZSFG is a vital educational hub for the residency program, which has been ranked as top Diagnostic Radiology Residence Program for last 6 consecutive years by Doximity and US News & World Report. There are 13 residents who access high-quality education activities and resources. There is direct attending-to-resident teaching every day in each activity. Fellowship trainings in Abdominal Imaging, Breast Imaging, and Neuroradiology are highly integrated with the Parnassus and VA campuses.
- Clinical & Teaching Conferences – include Resident teaching conference, Gyn. Tumor board, monthly QI conference, and others.
- Performance Improvement and Patient Safety- The projects demonstrate collaboration of UCSF and DPH for the benefit of patients.
 - a. Technologist Quality Assurance Feedback – tool for radiologists to enter feedback to technologists on examination quality for fewer repeats of exams
 - b. Peer Learning – tool for radiologists to enter feedback to other radiologists on errors in interpretation for avoidance of common diagnostic errors that impact patient safety
 - c. Contrast Extravasation – development of a system for reporting and tracking of all iodinated contrast extravasations, and a policy for documentation and management of contrast

extravasations. The goal is identify best practices to minimize occurrences and ensure appropriate follow-up of cases

- Patient Satisfaction– It is an important measure with all modalities surveyed. The 2018 interactive survey indicated >90% rate of Excellent or Good. The 2019 and 2020 surveys are delayed due to pandemic.
- Faculty Committee Participation- Faculty members participate in various committees.
- Faculty Research- There are multiple research projects such as TRACK-TBI, TRACK-SCI, Pomalidomide for HHT-related epistaxis, and Gallbladder Cryoablation which are funded by NIH, DOE, amongst others.
- Finances- For 2019-20, the total revenue amounted to \$15.2M with total expenses of \$14.9M. Surplus funds are invested in coding and billing staffing, clinical support, teaching, and supporting research mission.
- Summary- The strengths are skilled faculty, exceptional equipment and program opportunities, strong collaboration between UCSF and DPH. The challenges are maintenance of teaching/research priorities and safe environment during the pandemic. For next academic year, the goals are not only increased collaboration of UCSF and DPH but also continued maintenance of a safe environment.

Dermatology Service Report – Erin Amerson, MD, Service Chief

Details of the reports are as follows.

- Clinical Service
 - Scope of Clinical Service –
 - a. The department offers a broad scope of services for both adults and children. Regular clinical services include Adult Medical Dermatology, Surgical Dermatology, Phototherapy, Pediatric Dermatology, HIV Dermatology, Dermatopathology, Inpatient Consultation Service, and Teledermatology e-consult service.
 - b. Quarterly specialty clinics are in areas of Rheum/Derm and Hair Disorders. The new specialty clinics in 2021 will be treatment of Hidradenitis and pigmentary disorders.
 - c. Semimonthly clinical services are offered at Laguna Honda Hospital.
 - Leadership and Staff - A diverse group of faculty, administrative, and support staff is led by Drs. Erin Amerson, Kieron Leslie, Aileen Chang, Rita Khodosh, and Erin Mathes.
 - Service Volume - The department is actively engaged as indicated by the monthly average number (pre-COVID) of patients and services: 360 patients for Outpatient Adult, 35 patients for Pediatric, 55 patients for HIV Derm, 414 e-consults, 35 surgeries, 20 inpatient consults, 60 patients for Dermatopathology, 110 visits for Phototherapy. With COVID, there has been decreased inpatient service with increased utility of telephone and video appointments.
 - Teledermatology E-Consult Service
 - a. Service transitioned to EPIC systems and has been successful with e-consults reviewed several times a week by the providers and residents. Patients are either scheduled for Dermatology Clinic or care is virtually co-managed with primary provider.
 - b. Service is offered at all SFHN and Consortium Clinics, Pediatric and Adolescent Health, Positive Health, and Laguna Honda. Service recently started at Jail Health, Street Medicine, ER, and Urgent Care.
 - c. With EPIC implementation, the average annual e-consults is 5,000 which reflects a 50% increase since use of Medweb. Sixty percent is virtually co-managed with the primary providers. Also, a 19% increase in total patients (managed and co-managed) ensued after teledermatology implementation with the same number of providers. A cost analysis reveals savings of \$140 per new patient referral with almost \$500K annual savings during use of Medweb and about \$700K annual savings with increased e-consults.
- Training Program
 - a. Trainees - This is a diverse group of talented and passionate residents.

- b. Training Program Elements - There have been incentives to increase knowledge in management of different skin tones to ensure residents' expertise. Program elements encompass various areas: Medical, Pediatric, Surgical, Dermatopathology, HIV, Inpatient consultations, and Teledermatology.
- c. Other Trainees - They are Medical students (45/yr, pre-COVID), Family Medicine/Pediatrics/Internal Medicine residents (90/yr), Dermatopathology fellows, HIV/Global Health Fellowship, Medical student summer research and Master's fellows.
- PIPS Initiative
 - a. Outpatient F/U appointments - The root causes, variable indicators, and countermeasures for patient no-shows have been identified.
 - b. Avoiding TB Reactivation and New TB Infection for patients on Immunosuppressive Biologic and Non-Biologic Medication
- Research Program -The program is mainly focused on diseases affecting vulnerable populations. It includes research on HIV and Infectious Diseases, street medicines, vulnerable populations (homelessness, migrants and refugees, persons who inject drugs), global health program, DEI initiatives, health equity/disparities, patients' attitudes on social determinant screening in specialty care, healthcare informatics (ensuring skin of color is involved in training AI algorithm), and autoinflammation.
- Finance Report - The overall financial condition is stable with healthy reserves mainly due to freeze hiring for past few years. Majority of budget comes from affiliation agreements with smaller amounts from professional fees.
- Impact of COVID-19 - They include decreased live patient volume and increased wait time with focus on those needing in-person care, introduction of telephone/zoom visits, fewer students and rotators, shortened Global Health Fellowship, impacts (positive and negative) on research, and delayed faculty recruitment.

Summary

Strengths - engaged, mission-driven faculty excelling in teaching, clinical medicine, and research; stellar support staff; amazing residents; diverse patient population; commitment to DEI; collaborative relationships with other specialties; strong departmental and university representation; national leadership in global health, telemedicine, and HIV research; department finance manager; and solid financial position.

Weaknesses - clinic space in Ward 92; reliance on part-time and courtesy faculty; systems (getting better with EPIC introduction); drug formulary limitations (getting worse); research funding; and lack of dedicated service for consult service

Opportunities - national focus on vulnerable populations, skin of color, telemedicine, and health services research; move to 4B; building Quality and Safety Program; data-driven research in EPIC; incorporating social determinants into specialty care; leverage forced progress from COVID long-term; and develop philanthropic funding for research mission

Threats - effects of COVID on clinical service, teaching program, and research; difficulty building data extraction programs in EPIC (needing increased funding and personnel); "techquity" (limited ability to leverage technology for care delivery for patient population); hiring and salary freeze, budget cuts; salary inequity with UCSF and low FTE value compared with national means ; and changes to MediCal drug formulary

Goals

Short Term - recruit clinical and research faculty; SDOH curriculum for residents and faculty; continue to improve clinical and e-consult services; build QI operation; and improve research funding

Long Term - lead field in clinical expertise and research involving vulnerable populations; model dermatology care in the safety net; and philanthropic funding for research program.

Commissioner Comments:

Commissioner Chow thanked Dr. Winston for the report.

Commissioner Green noted the importance of crossing service lines to track patients' health issues. She asked if there is an EPIC system that can be utilized for tracking a patient's Melanoma and will it show up in different service lines on Epic. Dr. Day stated that Dermatology has had trouble with elements of Epic so they are creating a Melanoma log; until that is developed they are using a paper log.

Commissioner Green asked if Epic has a reusable structure that enables any department to build their modules. Dr. Day stated that the issue with Dermatology was learning the intricacies of Epic.

Commissioner Green asked the parameters regarding protocols for assessing lesions. Dr. Winston stated that the department has an internal guideline for review of e-consults. When they do not have the information they need, staff will schedule an in-person appointment with the patient.

Regarding the EMS Medicine Privileges List, Commissioner Chow asked about the term, "lifetime clinical record." Dr. Winston stated that this terminology should be edited because it refers to a system used prior to implementation of Epic.

Regarding the EMS Medicine Privileges List, Commissioner Green noted that the term "SFGH" should be changed to "ZSFG." She stated that 120 hours allowed to see 30 patients doesn't seem like enough experience with patients. Dr. Winston stated that the volume per shift is expected to be high. She noted that there is a limited number of Emergency Department staff who will earn this privilege.

Commissioner Chow asked for more information regarding what the EMS privileges will allow a provider to do. Dr. Winston stated that this is a specialty group in the Emergency Department which gives additional expertise in oversight of pre-hospital care.

Regarding the Surgery Privileges List, Commissioner Chow asked what the term "member" means. Dr. Winston stated that she would follow-up on this question through Mr. Morewitz.

Action Taken: The Committee unanimously approved the following:

- Radiology Rules and Regulations
- Dermatology Rules and Regulations
- Surgery Privileges List
- EMS Medicine Privileges List

8) OTHER BUSINESS

This item was not discussed.

9) PUBLIC COMMENT

There was no public comment.

10) CLOSED SESSION

- A) Public comments on All Matters Pertaining to the Closed Session
- B) Vote on whether to hold a Closed Session (San Francisco Administrative Code Section 67.11)
- C) Closed Session Pursuant to Evidence Code Sections 1156, 1156.1, 1157, 1157.5 and 1157.6; Health and Safety Code Section 1461; and California Constitution, Article I, Section 1.

CONSIDERATION OF CREDENTIALING MATTERS**CONSIDERATION OF PERFORMANCE IMPROVEMENT AND PATIENT SAFETY REPORTS AND PEER REVIEWS****RECONVENE IN OPEN SESSION**

1. Possible report on action taken in closed session (Government Code Section 54957.1(a)2 and San Francisco Administrative Code Section 67.12(b)(2).)
2. *Vote to elect whether to disclose any or all discussions held in closed session (San Francisco Administrative Code Section 67.12(a).) (Action item)*

11) ADJOURNMENT

The meeting was adjourned at 5:36pm.